

PCA Case Manager Training

Part 2:

Financial Eligibility

OFFICE OF ADMINISTRATIVE HEARINGS

ADMINISTRATIVE LAW JUDGE SHARON E. GOODIE

WELCOME!

▶ Thank you for joining us today!

Presentation Format and Technology Rules

Presenters

- ▶ Administrative Law Judge Sharon E. Goodie
- ▶ Aida Fitzgerald, Esquire
 - ▶ Legal Aid Society of the District of Columbia, Public Benefits Unit
- ▶ Daniela de la Piedra, Esquire
 - ▶ Legal Counsel for the Elderly
- ▶ George L. Marion, Jr.
 - ▶ Social Service Representative, Department of Human Services
- ▶ Principal Administrative Law Judge Bennett Rushkoff

Format of presentation

- ▶ This is a 90 minute training.
 - ▶ The first hour and 15 minutes will have prepared presentations from judges, attorneys and a Social Service Representative.
 - ▶ The last 15 minutes are reserved for audience questions.
 - ▶ At the end of the 90 minutes,
 - ▶ Everyone is free to leave, but...
 - ▶ The presenters will remain on the call for up to 30 more minutes to respond to extra questions.

Technology rules

Audience members,

1. Please keep your microphones muted throughout the 90 minute presentation.

Technology rules

Audience members:

2. Please write all questions in the chat box.
 - ▶ You may submit questions at any point during the presentation.
 - ▶ The presenters may answer some questions as they are received.
 - ▶ We will save most questions until the end of the prepared presentations.

Timeline of application for PCA services

Step One: Application.

MEDICAID - FORM CM-100

DEPARTMENT OF HEALTH AND HUMAN SERVICES
CENTERS FOR MEDICARE & MEDICAID SERVICES

PATIENT'S REQUEST FOR MEDICAID
IMPORTANT - SEE OTHER SIDE FOR MEDICAL INSURANCE BENEFITS SOCIAL SECURITY

PLEASE TYPE OR PRINT INFORMATION

WARNING: Anyone who misrepresents or falsifies essential information requested by this form may upon conviction be subject to fine and/or imprisonment. Federal law. No Part B Medicare benefits may be paid unless this form is received as required by existing law and regulations (28 CFR 2.201).

Name of Beneficiary from Health Insurance Card
(Last) (First) (Middle)

Number from Health Insurance Card

Address (City, State, Zip Code)
Is a new address ☐

PATIENT'S SEX
☐ Male
☐ Female

SEND COMPLETED FORM TO:
Your Medicaid Carrier
If you need help, call 1-800-MEDICAID
(1-800-635-6275)

Step One: Application.

- ▶ Submit first-time EPD Waiver applications to the DC Department of Aging and Community Living.
- ▶ Submit recertification requests to the Economic Security Administration of DHS.

Step Two: Processing the application.



Step Two: Processing the application.

- ▶ The DC Department of Health Care Finance (DHCF) is the designated Medicaid State Agency.
 - ▶ DHCF sets all Medicaid policies, including all EPD Waiver policies.
 - ▶ Under federal law, DHCF may delegate certain parts of Medicaid processing to other agencies.

Step Two: Processing the application.

- ▶ DHCF divides EPD Waiver processing responsibility:
 - ▶ DHCF processes the medical eligibility for PCA services, called the nursing facility Level of Care (LOC) decision.
 - ▶ The Department of Human Services (DHS) processes financial eligibility for PCA services.

Step Two: Processing the application.

- ▶ Under DC law, DHCF must complete its medical eligibility decision before DHS can start assessing financial eligibility.
- ▶ If DHCF finds that a client does not meet the nursing facility Level of Care, DHS does not assess financial eligibility.

Step Three: Assessing medical eligibility.



Step Three: Assessing medical eligibility

- ▶ DHCF contracts with outside vendors to assess medical Level of Care eligibility.
 - ▶ Liberty Health, using a computer-generated tool, assesses nursing facility Level of Care, and recommends a certain number of PCA hours.
 - ▶ A different outside vendor, Comagine, processes requests to reconsider Liberty Health determinations.

Step Three: Assessing medical eligibility.

- ▶ DHCF has two levels of PCA services:
 - ▶ EPD Waiver; and
 - ▶ State Plan.
- ▶ A customer must receive a minimum score of 9 in the Liberty Health assessment to qualify for EPD Waiver services.
- ▶ EPD Waiver benefits include case management services, and other benefits that State Plan does not provide.

Step Three: Assessing medical eligibility.

- ▶ If the customer does not qualify for EPD Waiver services, she may still qualify for “State Plan” PCA services:
- ▶ If Liberty Health determines that the customer does not meet the nursing facility Level of Care, but should still receive some PCA hours

Step Four: Assessing financial eligibility.



Step Four: Assessing financial eligibility.

- ▶ DHS looks at two types of financial information:
 - ▶ Income; and
 - ▶ Resources (assets).

Step Four: Assessing financial eligibility -- income.



Step Four: Assessing financial eligibility -- income.

- ▶ Income includes:
 - ▶ Earned income from jobs;
 - ▶ Unearned income, including:
 - ▶ Benefits such as unemployment insurance and SNAP (Food Stamps);
 - ▶ Child support received;
 - ▶ Pension benefits.

Step Four: . Assessing financial eligibility -- income

- ▶ If the customer is receiving SSI, the customer is automatically financially eligible.
- ▶ Please note that customers who receive SSDI or Social Security Retirement are not automatically financially eligible for PCA services (unless they also receive SSI benefits).

Step Four: Assessing financial eligibility -- income.

- ▶ DHCF sets the EPD Waiver and State Plan Medicaid income ceilings.
 - ▶ The EPD Waiver income ceiling is 3 times the SSI Federal Benefit Rate (FBR).
 - ▶ The State Plan income ceiling is the “straight Medicaid” rate, which is a percentage of the Federal Poverty Level (FPL).
 - ▶ The FBR and the FPL are adjusted for cost of living increases every year, so the income ceilings for both programs change every year.

Step Four: Assessing financial eligibility -- income.

- ▶ If DHS finds that the client has too much income for the EPD waiver, the client can participate in the spend-down program:
 - ▶ Spend-down is like a deductible in commercial medical insurance.
 - ▶ The customer must pay for a calculated amount of out-of-pocket medical expenses before the customer becomes eligible to have Medicaid pay for her PCA services.
 - ▶ DHS usually calculates the spend-down amount in 6-month increments.

Step Four: Assessing financial eligibility -- income.

- ▶ Be prepared -- spend-down amounts are usually many thousands of dollars for the 6-month period.
 - ▶ EPD Waiver customers who are over-income do not spend down to the EPD Waiver income ceiling.
 - ▶ Over-income EPD Waiver customers must spend down to the Medically Needy Income Level (MNIL), which is 100% of the Federal Poverty Level.

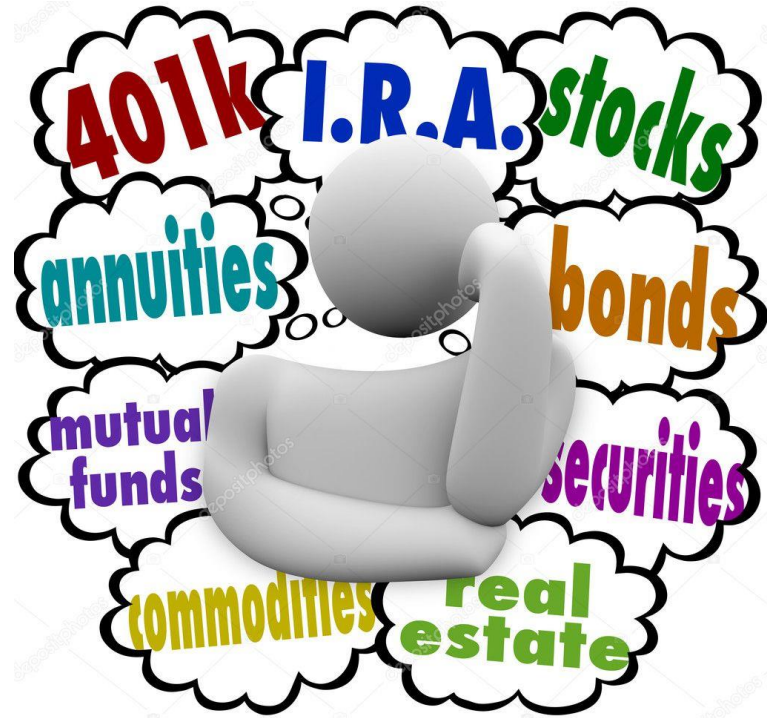
Step Four: Assessing financial eligibility -- income.

- ▶ Some examples of qualifying out-of-pocket spend-down costs, in addition to ordinary medical expenses, are:
 - ▶ Home renovations to accommodate a wheelchair;
 - ▶ Adding an elevator or a staircase lift.
 - ▶ Bathroom renovations, such as adding railings or removing a shower step;
 - ▶ Vehicle renovations to accommodate a wheelchair;
 - ▶ Purchasing a hospital bed.

Step Four: Assessing financial eligibility -- income.

- ▶ Customers may use spend-down for EPD Waiver and State Plan Medicaid PCA services.

Step Five: Assessing financial eligibility -- resources.



Step Five: Assessing financial eligibility -- resources.

- ▶ DHCF regulations require that a customer have no more than \$4,000 in assets.
- ▶ There are many exceptions and exemptions to the \$4,000 resource ceiling, including, but not limited to :
 - ▶ The value of the customer's primary residence;
 - ▶ Burial accounts;
 - ▶ Assets which should be attributed to a spouse who does not require PCA care.

Step Five: Assessing financial eligibility -- resources.

- ▶ Even if the customer's resources do not fall into any of the exceptions or exemptions, the customer may be eligible for an “undue hardship” exemption.

Step Five: Assessing financial eligibility -- resources.

- ▶ If the customer has more than \$4,000 in assets, avoid the temptation to give the excess resources to the customer's relatives.
 - ▶ Any financial donations to relatives within 5 years of applying for PCA services through Medicaid may be considered illegal transfers.
 - ▶ Illegal transfers may result in a penalty period, during which the customer cannot receive Medicaid coverage of PCA services.

Timeline of an OAH case

Step One: The Request for Hearing

- ▶ File a Request for Hearing
 - ▶ Please provide your client's email address, or the email address of a relative.
 - ▶ Please include your own name, mobile phone number, and email address.
 - ▶ Please email to oah.filing@dc.gov
 - ▶ Tell your client that you have requested a hearing at OAH.

Step Two: Scheduling

- ▶ OAH schedules an Initial Status Conference.

Step Three: Preparation

- ▶ Place the Initial Status Conference date, time and dial-in information in your calendar.
- ▶ If there is no longer a need for the case, send an email to OAH.
 - ▶ If your client's PCA hours are satisfactory.
 - ▶ If your client has been moved to a nursing home.
 - ▶ If your client has moved to another state.
 - ▶ If your client has passed away.

Step Three: Preparation

- ▶ Prepare your client for the Initial Status Conference.
 - ▶ Tell your client about the Initial Status Conference date and time.
 - ▶ Figure out who will attend the Initial Status Conference:
 - ▶ You
 - ▶ Your client?
 - ▶ A relative?
 - ▶ Some combination

Step Three: Preparation

- ▶ Tell your client about the choice of four options to resolve her case:
 - ▶ DHCF reconsideration
 - ▶ Change of condition assessment;
 - ▶ Recertification assessment; or
 - ▶ Trial.

Step Three: Preparation

- ▶ Once your client has selected an option,
 - ▶ Contact the DHCF representative to discuss your client's wishes.
 - ▶ Ask the DHCF representative if you can settle the case.
 - ▶ Try to find an attorney for your client if DHCF is not able to settle the case.

Step Four: The Initial Status Conference

- ▶ An OAH Judge holds the Initial Status Conference.
 - ▶ You must attend the OAH Status Conference.
 - ▶ If you have a conflict you have two options:
 - ▶ Request in writing a new Initial Status Conference date.
 - ▶ Ask a relative or your client to attend the Initial Status Conference.

Step Four: The Initial Status Conference

- ▶ The judge and parties will decide the direction for the case
 - ▶ DHCF reconsideration
 - ▶ Change of condition assessment;
 - ▶ Recertification assessment; or
 - ▶ Trial.

Step Five: After the Initial Status Hearing

- ▶ If your client is going to trial:
 - ▶ Look for an attorney for your client.
 - ▶ Reach out to a legal service provider, i.e. Legal Counsel for the Elderly or Legal Aid;
 - ▶ If one legal service provider turns your down, ask for the name of another legal service provider.
- ▶ If no legal service provider can take your client's case, prepare your client for trial.
- ▶ Most PCA trials last 2-3 days.

Step Five: After the Initial Status Hearing

- ▶ If your client is not going to trial, but is seeking another assessment:
 - ▶ Prepare the necessary paperwork promptly.
 - ▶ Ask for help from the judge (in writing) if you have trouble getting help from your client's doctor.

Step Six: Post-trial

- ▶ After the trial, the judge will send you a written Final Order.
- ▶ Your client has two options if she does not think the Final Order was properly decided:
 - ▶ Reconsideration through OAH.
 - ▶ Appeal to the DC Court of Appeals.

Thank you!

- ▶ Thank you for the hard work you do for your clients!
- ▶ Thank you for attending this training today.
- ▶ Please send us questions through the chat box.